

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1082

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 JUL 27 PM 12:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N92000000488

1. Corporation Name

Miami Housing And Community  
Development Corporation

2. Principal Office Address

3410 NW 73<sup>rd</sup> Avenue

Suite, Apt. #, etc.

City & State

Miami, Florida

Zip

33122

Country

U.S.A.

3. Mailing Office Address

3410 NW 73<sup>rd</sup> Avenue

Suite, Apt. #, etc.

City & State

Miami, Florida

Zip

33122

Country

U.S.A.

4. Date Incorporated or Qualified  
To Do Business in Florida

11-23-1992

5. FEI Number

65-0387414

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Douglas R. Mayer

Street Address (P.O. Box Number is Not Acceptable)

3410 NW 73<sup>rd</sup> Avenue

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33122

500040253475  
08/17/04--01064--021 \*\*131 25

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

*[Signature]*  
REGISTERED AGENT MUST SIGN

Date July 26, 2004

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	Douglas R. Mayer	P.O. Box 010693	Miami, FL 33101
D	Robert A. Stevens	17101 N.E. 14 <sup>th</sup> Ave / Apt 5	North Miami Beach, FL 33162
STD	David Kwiat	11207 S.W. 114 <sup>th</sup> Lane circle	Miami, FL 33176
D	Carlos Haas	10431 SW 88 <sup>th</sup> St / Apt D-104	Miami, FL 33176

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 26, 2004

Date

Daytime Phone #

CR2E081 (01/04)

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## **Miami Housing & Community Development Corporation**

**3410 NW 73<sup>rd</sup> Avenue, Miami, FL 33122**

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July 26, 2004

Attention: Katrina  
Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Reinstatement of Miami Housing and Community Development Corporation (a Florida Non-Profit Corporation)

Dear Katrina:

The purpose of this letter is to request that the Miami Housing and Community Development Corporation be reinstated and that we receive our Certificate of Good Standing (I have enclosed a check for \$131.25 for the reinstatement fee and Good Standing Certificate).

Unfortunately, we did not receive the annual report forms in the mail for 2003 and therefore request your assistance with this matter.

Sincerely,



Douglas R. Mayer  
President